

Wisconsin Initiative for Infant Mental Health

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What is the Wisconsin Initiative for Infant Mental Health?

A group of professionals in Wisconsin whose work centered on infants, young children, and their families formed a steering committee to explore the feasibility of creating a partnership to support the healthy social and emotional development of infants, young children, and their families. A Midwest Regional Summit held in Chicago, Illinois in November 2000, inspired the Wisconsin representatives to move forward in their efforts to create an initiative devoted to early childhood mental health issues. The group returned to Wisconsin, developed a draft vision and mission and secured first year funding. WIIMH officially started with the hire of a director in October 2001.

WIIMH focus is to support the healthy social and emotional development of children from birth to five years old. The vision of WIIMH is the fostering of healthy development for every infant and young child in Wisconsin by having his or her mental health and developmental needs met within the context of their community and culture. The WIIMH's mission involves three related but separate activities:

- Disseminate information regarding the expected social and emotional development of infants and young children, emphasizing (1) the importance of sensitive, responsive, and consistent relationships for infants and families, and (2) the value of therapeutic interventions when appropriate.
- Promote collaboration among service providers, families, and others concerned with the mental health of infants, young children, families, and their caregivers to build a seamless and full spectrum service delivery system.
- Influence public policy at the local, state, and national levels that supports the healthy social and emotional development of infants, young children, and their families.

What do we really mean by infant and early childhood mental health?

Infant Mental Health is synonymous with social and emotional development of our youngest children. Social and emotional development involves skills such as self confidence, curiosity, motivation, persistence, self control and trust, all of which affect future learning, growth and success. The development of all of these traits begins in infancy and within the context of relationships. Emotional and social milestones include a child's ability to experience, regulate and express emotions and form close and secure interpersonal relationships. A child's capacities to identify their own feelings, experience empathy for another and constructively manage strong emotions are skills that begin in early childhood and support later learning.

Why care about Social and Emotional Development?

The early preschool years are a critical time for skill formation and lay the foundation for future success in school and beyond. Practice-based evidence and scientific research have demonstrated the importance of early experiences as well as the interactions between genetics and environment.

Over the last twenty-five years we have gained a greater understanding about what can hinder and what can promote healthy social and emotional development. Children who are unable to attain early social and emotional milestones do not do well in early school years. Research indicates that children who start behind tend to stay behind. These children are at a higher risk for school problems and juvenile delinquency. Research and experiential knowledge from the field of infant and early childhood mental health confirm that a child's emotional development forms the foundation for all later development and sets the stage for relationships and readiness to learn. Research also indicates that children participating in "enriched early childhood programs are more likely to complete school, and much less likely to require welfare benefits, become teen parents or participate in criminal activities. Rather, they become productive adults." (Heckman, James: Ounce of Prevention, 2000, Chicago, Illinois)

Current Efforts and Activities of Wisconsin Initiative for Infant Mental Health

Wisconsin Infant and Early Childhood Mental Health Plan

The Wisconsin Infant and Early Childhood Mental Health Plan presents a blueprint for a comprehensive system of care that includes prevention, early intervention and treatment. The goal is not to set up another silo for services but rather weave infant and early childhood development principles into the fabric of all systems that touch the life of children under the age of five. The plan works through existing public and private structures to enhance people's ability to support healthy social and emotional development.

- **Plan Development**

In October 2002, WIIMH hosted an Infant and Early Childhood Mental Health Summit. Over 100 participants representing a variety of disciplines from both state government including public health, mental health, substance abuse, public instruction, corrections and education and private providers gathered to share their thoughts on the challenges and opportunities related to infant and early childhood mental health. Participants at the Summit were divided into five mixed discipline work groups and answered questions related to public policy, training, and service delivery. The data gathered was used to develop the Wisconsin Infant and Early Childhood Mental Health Plan.

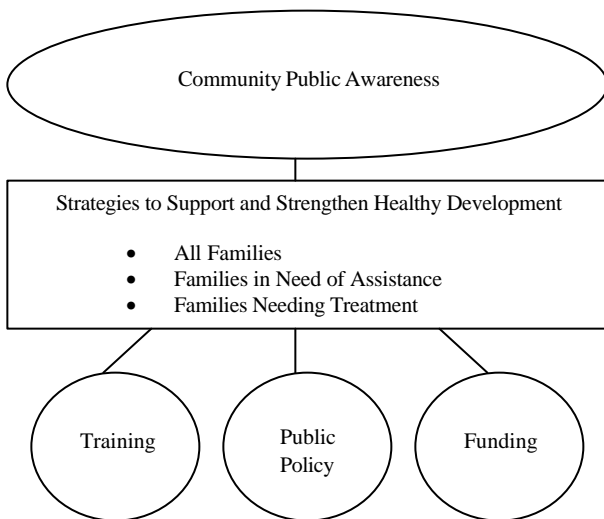
Four sub-committees were created to develop the plan: policy, service delivery, training, and public awareness. The goal of each sub-committee was to develop recommendations using the information gathered at the Summit. The sub-committees met over a 9-month period and developed goals, as well as corresponding potential strategies, and implementation tasks related to their sub-committees. An edit committee compiled the recommendations of each subcommittee into one plan document and reviewed for completeness and flow. Next, a review team comprised of northern and rural individuals, including parents, provided content suggestions regarding applicability to their specific setting and experience. Finally, a system/expert review team provided edits based upon their respective expertise.

Participants from a number of settings guided the work and included parents as well as representatives from multiple agencies and systems that provide direct care or education for children under the age of five. The systems include child welfare, child care, corrections, public health, mental health, substance abuse, health care, parent education and support, early education, academia, early intervention, and Medicaid.

- **Plan Content**

The plan has seven goals. All of the goals have corresponding suggested strategies and implementation tasks. The framework moves from the broader population to more targeted sub-populations. It begins by looking at the community at large and moves through a continuum focusing first on all children and families, then children in need of early intervention and finally, children in need of treatment. The first four goals focus on communities, children, and their families. Goals five, six and seven address supports necessary to effectively influence change: training, sound public policy and funding. These supports are the infrastructure of the system of care. The graphic illustrates the system of care moving from the broad population to more targeted groups and includes the supports necessary for a comprehensive system of care.

Infant Mental Health System of Care



The broad objective is to weave infant mental health practices and principles into the everyday activities of people working and interacting with infants, young children, and their families. Below are the goals found in the Infant and Early Childhood Mental Health Plan:

- Goal 1:* Raise the public awareness of the mental health and developmental needs of children birth to age five and the consequences of poor social and emotional development.
- Goal 2:* Enhance communities' ability to support and strengthen the emotional well-being of all young children and their families.
- Goal 3:* Develop a coordinated system to screen and assess the social and emotional mental health needs of children birth to age five and develop a consistent referral procedure for services in the context of family, culture, and community.
- Goal 4:* Increase and support mental health treatment options and interventions for children birth to age five and their families.
- Goal 5:* Build a training infrastructure for infant mental health in Wisconsin including Level 1 front-line caregivers, Level 2 early interventionists, and Level 3 infant mental health therapists.
- Goal 6:* Develop public policies that support the promotion of healthy social and emotional development as well as prevention, early intervention, and mental health treatment services for children birth to age five and their families.

Goal 7: Secure additional funding for mental health services for children birth to age five and their families across funding streams.

- **Plan Implementation**

The plan is rather ambitious so we can not work on everything at once but need to work on specific pieces. Logically, some activities need to occur before others. For example, before workers start screening children to identify if there is a problem, we need to know who in the state is competent to provide mental health services to young children. Below is a list of the four action groups that have formed to define specific action steps, delineate timelines and identify who will be responsible for each step.

1. Public Awareness and Community Readiness
2. Enhancing capacity to support healthy social and emotional development
3. Determining who provides mental health treatment to children five and under
4. Increasing coordination of Birth to Three services and child welfare system

The action groups are also responsible for defining the specific child centered outcomes. The action groups are again comprised of parents and people from a variety of disciplines from both the public and private sector.

The plan is a work in progress. Listening sessions will be held throughout the state with parents and other key informants to ensure the recommendations represent all children and families in the state. These sessions will help determine most helpful strategies and implementation tasks to support children and families starting at birth. To see the entire plan, please go to www.wiimh.org.

Infant Mental Health Monthly Email Newsletter

WIIMH sends out a monthly email newsletter. The newsletter updates subscribers on our current efforts including progress on the Infant and Early Childhood Plan. The newsletter also provides links to articles regarding social and emotional development as well as current training opportunities. To subscribe, contact Julie Bark, Administrative Assistant at julie.infantmh@tds.net or call Julie at 608-442-0360.

Conclusion

Wisconsin Initiative for Infant Mental Health focuses efforts on promoting the healthy social and emotional development of all children five and under in Wisconsin. The broad objective is to weave infant mental health practices and principles into the everyday activities of people working and interacting with infants, young children, and their families. An early comprehensive childhood system of care promotes healthy development through prevention, early intervention and treatment. The system of care also needs to address training, collaboration among systems, funding, and reimbursement and public policies supporting young children and their families.

If you would like more information, go to www.wiimh.org. To get involved with Wisconsin Initiative for Infant Mental Health or if you have questions, please contact the Director, Therese Ahlers at 608-442-8036 or email at infantmh@tds.net.